Postcard: 04/03-6		RCCIPPA		
APR 1 4 2003 & U.S.  Under the Raperwork Reduction Act of 1995, no persons are required to respond to a	Patent and Trademark Office: 11	PTO/SB/30 (10-01) hrough 10/31/2002. OMB 0651-0031 .S. DEPARTMENT OF COMMERCE displays a valid OMB control number.		
REQUEST REQUEST	Application Number	09/514,759		
FOR	Filing Date	February 28, 2000 ,		
CONTINUED EXAMINATION (RCE)	First Named Inventor	John Vivian Wood		
TRANSMITTAL	Art Unit	3731		
Address to: Commissioner for Patents	Examiner Name	Michael H. Thaler		
Box RCE Washington, DC 20231	Attomey Docket Number	SWIN 2012		
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.  Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.				
1. Submission required under 37 CFR 1.114  a. Previously submitted i. Consider the amendment(s)/reply under 37 CFR 1.116 previously filed on				
b. X Enclosed  i. X Amendment/Reply  ii. Affidavit(s)/Declaration(s)  iv. X	Information Disclosure Other Extension			
2. Miscellaneous  a. Suspension of action on the above-identified application is requested under 37 CFR 1.103(c) for a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)  b. Other				
3. Fees The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.				
a. The Director is hereby authorized to charge the following fees, or credit any overpayments, to Deposit Account No.				
i. RCE fee required under 37 CFR 1.17(e)				
<u> </u>				
b. Ex Check in the amount of \$ 2,088 enclosed				
c. Payment by credit card (Form PTO-2038 enclosed)  WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.				
SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED				
Name (Print Type) John Smith-Hill	Registration No. (Attorn	ey/Agent) 27,730		
Signature	Date April 7,	2003		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
Name (Print /Type)	John Smith-Hill	Registration No. (Attorney/Agent)	27,730		
Signature	hhm(2 Tha	Date April 7, 2003	<u></u>		

## CERTIFICATE OF MAILING OR TRANSMISSION

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner For Patents, Box RCE, Washington, DC 20231, or facsimile transmitted to the U.S. Patent and Trademark Office on the date shown below.

Name (Print/Type) John SmiÆd-Hill Date April 7, 2003 Signature

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND Fees and Completed Forms to the following address: Assistant Commissioner for Patents, Box RCE, Washington, DC 20231.